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PIPER RUDNICK LLP
P.O. Box 64807
Chicago, Illinois 60664-0807
Telephone (312) 368-4000
Telecopier (312) 236-7516

CUSTOMER NO. 28465

Attorney Docket No.: 218728-000205
Date: November 20, 2003

MAIL STOP PATENT APPLICATION
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Stephanie Warner-Wallace

Name (typed or printed)

Stephanie Warner-Wallace
Signature

22141 U.S. PTO
10/718423



Sir:

We enclose the following papers for filing in the United States Patent and Trademark Office in association with a new patent application:

By: Thierry LUCIDARME and Nidham BEN RACHED

For: METHOD FOR DETECTING A SIGNAL AND RECEIVER SYSTEM FOR THE IMPLEMENTATION OF THE METHOD

- ☒ Assignee NORTEL NETWORKS LIMITED.
- ☒ Patent Cover Page - 1 sheet.
- ☒ Application - 18 sheets; including 16 claims total, 2 independent claims.
- ☒ 1 sheet of drawings (formal).
- ☐ Declaration and Power of Attorney.
- ☐ An Assignment of the invention to _____, a corporation of _____.

- ☒ Benefit of the filing date of French Application No. FR 02 15273 filed December 4, 2002 is claimed pursuant to 35 U.S.C. 119.
- ☒ A certified copy of French Application No. FR 02 15273.
- ☐ A first preliminary amendment
- ☐ An Information Disclosure Statement Under 37 CFR 1.97, including ____ references.
- ☒ The filing fee has been calculated as shown below:

FOR:	(COL. 1) NO. FILED	(COL. 2) NO. EXTRA	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
			RATE	FEE	RATE	FEE
BASIC FEE				\$ OR \$		770.00
TOTAL CLAIMS	16 - 20 =	0	x 9 =	\$ 0	x 18 =	\$ 0
INDEP CLAIMS	2 - 3 =	0	x 43 =	\$ 0	x 86 =	\$ 0
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED			+ 145 =	\$ 0	+ 290 =	\$ 0
* If the difference in Co. 1 is less than zero, enter "0" in Col. 2.			TOTAL	\$ OR \$	TOTAL	\$ 770.00

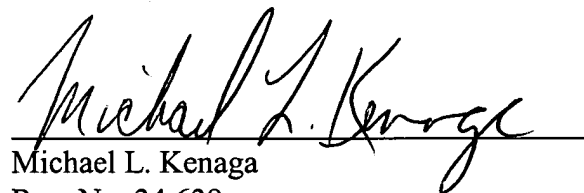
- ☒ A check in the amount of \$770.00 to cover the filing fee(s) for the application is enclosed.
- ☐ Please charge our Deposit Account No. 18-2284 in the amount of \$ _____. A duplicate copy of this letter is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional filing fees that may be required under 37 CFR 1.16 for this application and for any amendment thereto, or credit any overpayment to Account No. 18-2284. A duplicate copy of this letter is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 18-2284. A duplicate copy of this letter is enclosed.
- ☒ Any patent application processing fees under 37 CFR 1.17.
- ☐ The Issue Fee set in 37 CFR 1.18 at or before mailing of the Notice of Allowance, pursuant to 37 CFR 1.311(b).

Please address all telephone calls to Michael L. Kenaga at telephone number (312) 368-8937.

Please address all correspondence to:

Michael L. Kenaga
PIPER RUDNICK LLP
P.O. Box 64807
Chicago, Illinois 60664-0807

Respectfully submitted,

A handwritten signature in black ink, reading "Michael L. Kenaga", is written over a horizontal line. The signature is fluid and cursive, with the first name "Michael" being the most prominent part.

Michael L. Kenaga
Reg. No. 34,639

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